

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	g		08/01/11
O.I.P.E. CLASSIFIER	A.T	32	5/17
FORMALITY REVIEW	A.T	1071	06/20/11
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	03/18
2	03/18
3	03/18
4	03/18
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50	03/18

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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4.5.  
 6.20.01